



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: DAVID COLVIN Serial No.: 10/605,062
Filed: September 5, 2003 Confirmation No.: 2061
Attorney Docket: COL406PUS
For: **METHOD FOR REDUCING UNAUTHORIZED USE OF SOFTWARE/DIGITAL
CONTENT INCLUDING SELF-ACTIVATING/SELF-AUTHENTICATING
SOFTWARE/DIGITAL CONTENT**

**INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. § 1.97(b)**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In compliance with the duty of disclosure under 37 C.F.R. § 1.56 and § 1.97-1.98, the references listed and identified on the attached Form PTO/SB08A are being submitted herewith for consideration by the Examiner. This Statement is being filed in accordance with 37 C.F.R. § 1.97(b).

While this Statement is being filed in compliance with the duty of disclosure, citation of the attached references is not to be construed as an admission that any of the references are "material" as defined under 37 C.F.R. § 1.56(b).

A copy of each reference listed on the attached Form PTO/SB08A is included herewith. Consideration and entry into the record of these references is respectfully requested.

Respectfully submitted,

DAVID COLVIN

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PTO/SB/08B (10-01)

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Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 1 of 1

Substitute for form 1449B/PTO				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	10/605,062
				Filing Date	September 5, 2003
				First Named Inventor	David Colvin
				Group Art Unit	
				Examiner Name	
				Attorney Docket Number	COL406PUS
(use as many sheets as necessary)					
Sheet	1	of	1		

OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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